

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	SS	JCSM	1/28/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 -: ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	Final Original 1/11/01 2/5/01
2	✓
3	✓
4	✗
5	○
6	○
7	✓
8	✗
9	✗
10	○
11	✓
12	✓
13	○
14	○
15	○
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	○
23	○
24	○
25	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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